

**SCHEDULE A-P  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**JEB 2016, INC.****A. Full Name (Last, First, Middle Initial)****CHARLES TSE**

Mailing Address 5100 DU PONT BLVD., 11D

City	State	Zip Code
FORT LUDERDALE	FL	11374-

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
**SELF-EMPLOYED**Occupation  
**CONSULTANT**

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17.163559**

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		28		2015

**CONTRIBUTION**

Amount of Each Receipt this Period

100.00

**B. Full Name (Last, First, Middle Initial)****CHARLES TSE**

Mailing Address 5100 DU PONT BLVD., 11D

City	State	Zip Code
FORT LUDERDALE	FL	11374-

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
**SELF-EMPLOYED**Occupation  
**CONSULTANT**

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

**Transaction ID : SA17.177532**

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		18		2015

**CONTRIBUTION**

Amount of Each Receipt this Period

100.00

**C. Full Name (Last, First, Middle Initial)****DR. GEORGE TSETSEKOS**

Mailing Address 520 SUGARTOWN RD

City	State	Zip Code
DEVON	PA	19333-1716

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
**DREXEL UNIVERSITY**Occupation  
**DEAN**

Receipt For: 2016

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2600.00

**Transaction ID : SA17.166344**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		10		2015

**CONTRIBUTION**

Amount of Each Receipt this Period

2600.00

**Subtotal Of Receipts This Page (optional)**.....

2800.00

**Total This Period (last page this line number only)**.....